



321532

<b>LAND-03104514</b> <b>AIR 031045AAF</b> 		<b>POTENTIAL HAZARDOUS WASTE SITE</b> <b>PRELIMINARY ASSESSMENT</b> <b>PART 1 - SITE INFORMATION AND ASSESSMENT</b>		<b>I. IDENTIFICATION</b> 01 STATE 02 SITE NUMBER <b>ILD 980497739</b>	
<b>II. SITE NAME AND LOCATION</b>					
01 SITE NAME (Legal, common, or descriptive name of site)			02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER		
<b>COLUMBIA TOOL STEEL CO</b>			<b>14TH &amp; STATE ST.</b>		
03 CITY		04 STATE	05 ZIP CODE	06 COUNTY	07 COUNTY CODE 08 CONG DIST
<b>CHICAGO HEIGHTS</b>		<b>IL</b>	<b>60411</b>	<b>COOK</b>	<b>031 17</b>
09 COORDINATES LATITUDE		LONGITUDE		10 DIRECTIONS TO SITE (Starting from nearest public road)	
<b>41 30 22.0</b>		<b>087 36 58.0</b>		<b>STEGER-56-B</b>	
<b>SEE ATTACHMENT'S ON THE BACK.</b>					
<b>III. RESPONSIBLE PARTIES</b>					
01 OWNER (If known)			02 STREET (Business, mailing, residential)		
03 CITY			04 STATE	05 ZIP CODE	06 TELEPHONE NUMBER
					( )
07 OPERATOR (If known and different from owner)			08 STREET (Business, mailing, residential)		
09 CITY			10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER
					( )
13 TYPE OF OWNERSHIP (Check one)					
<input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL: _____ (Agency name) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER: _____ (Specify) <input type="checkbox"/> G. UNKNOWN					
14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)					
<input checked="" type="checkbox"/> A. RCRA 3001 DATE RECEIVED: <b>11/11/80</b> MONTH DAY YEAR <input type="checkbox"/> B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: _____ MONTH DAY YEAR <input type="checkbox"/> C. NONE					
<b>IV. CHARACTERIZATION OF POTENTIAL HAZARD</b>					
01 ON SITE INSPECTION			BY (Check all that apply)		
<input checked="" type="checkbox"/> YES    DATE <b>02/26/75</b> MONTH DAY YEAR <input type="checkbox"/> NO <b>04/20/82</b> MONTH DAY YEAR			<input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input checked="" type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify)		
02 SITE STATUS (Check one)			03 YEARS OF OPERATION		
<input checked="" type="checkbox"/> A. ACTIVE <input type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN			<b>1973</b> — <input type="checkbox"/> UNKNOWN BEGINNING YEAR    ENDING YEAR		
04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED					
<b>NONE</b>					
05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION					
<b>NONE</b>					
<b>V. PRIORITY ASSESSMENT</b>					
01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)					





POTENTIAL HAZARDOUS WASTE SITE  
PRELIMINARY ASSESSMENT  
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER  
ILD 980497739

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A GROUNDWATER CONTAMINATION 02 ☐ OBSERVED (DATE \_\_\_\_\_) ☐ POTENTIAL ☐ ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

01 ☐ B SURFACE WATER CONTAMINATION 02 ☐ OBSERVED (DATE \_\_\_\_\_) ☐ POTENTIAL ☐ ALLEGED  
03 POPULATION POTENTIALLY AFFECTED \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

01 ☐ C CONTAMINATION OF AIR 02 ☐ OBSERVED (DATE \_\_\_\_\_) ☐ POTENTIAL ☐ ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

01 ☐ D FIRE/EXPLOSIVE CONDITIONS 02 ☐ OBSERVED (DATE \_\_\_\_\_) ☐ POTENTIAL ☐ ALLEGED  
03 POPULATION POTENTIALLY AFFECTED \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

01 ☐ E DIRECT CONTACT 02 ☐ OBSERVED (DATE \_\_\_\_\_) ☐ POTENTIAL ☐ ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

01 ☐ F CONTAMINATION OF SOIL 02 ☐ OBSERVED (DATE \_\_\_\_\_) ☐ POTENTIAL ☐ ALLEGED  
03 AREA POTENTIALLY AFFECTED: \_\_\_\_\_ (Acres) 04 NARRATIVE DESCRIPTION

01 ☐ G DRINKING WATER CONTAMINATION 02 ☐ OBSERVED (DATE \_\_\_\_\_) ☐ POTENTIAL ☐ ALLEGED  
03 POPULATION POTENTIALLY AFFECTED \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

01 ☐ H WORKER EXPOSURE/INJURY 02 ☐ OBSERVED (DATE \_\_\_\_\_) ☐ POTENTIAL ☐ ALLEGED  
03 WORKERS POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

01 ☐ I POPULATION EXPOSURE/INJURY 02 ☐ OBSERVED (DATE: \_\_\_\_\_) ☐ POTENTIAL ☐ ALLEGED  
03 POPULATION POTENTIALLY AFFECTED: \_\_\_\_\_ 04 NARRATIVE DESCRIPTION

<b>LAND-03104314</b> <b>EPA AIR-031045AAF</b>		<b>POTENTIAL HAZARDOUS WASTE SITE PRELIMINARY ASSESSMENT</b>		<b>I. IDENTIFICATION</b> 01 STATE 02 SITE NUMBER <b>IL0 980497739</b>	
<b>PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS</b>					
<b>II. HAZARDOUS CONDITIONS AND INCIDENTS</b> <small>(Continued)</small>					
01 <input type="checkbox"/> J. DAMAGE TO FLORA 04 NARRATIVE DESCRIPTION		02 <input type="checkbox"/> OBSERVED (DATE: _____) <input type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED			
01 <input type="checkbox"/> K. DAMAGE TO FAUNA 04 NARRATIVE DESCRIPTION <small>(include name(s) of species)</small>		02 <input type="checkbox"/> OBSERVED (DATE: _____) <input type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED			
01 <input type="checkbox"/> L. CONTAMINATION OF FOOD CHAIN 04 NARRATIVE DESCRIPTION		02 <input type="checkbox"/> OBSERVED (DATE: _____) <input type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED			
01 <input type="checkbox"/> M. UNSTABLE CONTAINMENT OF WASTES <small>(Spills, runoff, standing liquids, leaking drums)</small> 03 POPULATION POTENTIALLY AFFECTED _____		02 <input type="checkbox"/> OBSERVED (DATE: _____) <input type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED 04 NARRATIVE DESCRIPTION			
01 <input type="checkbox"/> N. DAMAGE TO OFFSITE PROPERTY 04 NARRATIVE DESCRIPTION		02 <input type="checkbox"/> OBSERVED (DATE: _____) <input type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED			
01 <input type="checkbox"/> O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs 04 NARRATIVE DESCRIPTION		02 <input type="checkbox"/> OBSERVED (DATE: _____) <input type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED			
01 <input type="checkbox"/> P. ILLEGAL/UNAUTHORIZED DUMPING 04 NARRATIVE DESCRIPTION		02 <input type="checkbox"/> OBSERVED (DATE: _____) <input type="checkbox"/> POTENTIAL <input type="checkbox"/> ALLEGED			
05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS					
<b>III. TOTAL POPULATION POTENTIALLY AFFECTED:</b> _____					
<b>IV. COMMENTS</b>					
<b>V. SOURCES OF INFORMATION</b> <small>(Cite specific references, e.g. state files, sample analysis, reports)</small>					
<b>IEPA - LAND &amp; AIR FILES</b>					

## EXECUTIVE SUMMARY

Columbia Tool Steel Co., 14th and State Street, Chicago Heights, IL 60411, Cook County, Lat. 41°-30'-22", Lon. 087°-36'-58". Person to contact: Bryan Boettger, Plant Engineer 312/757-5353.

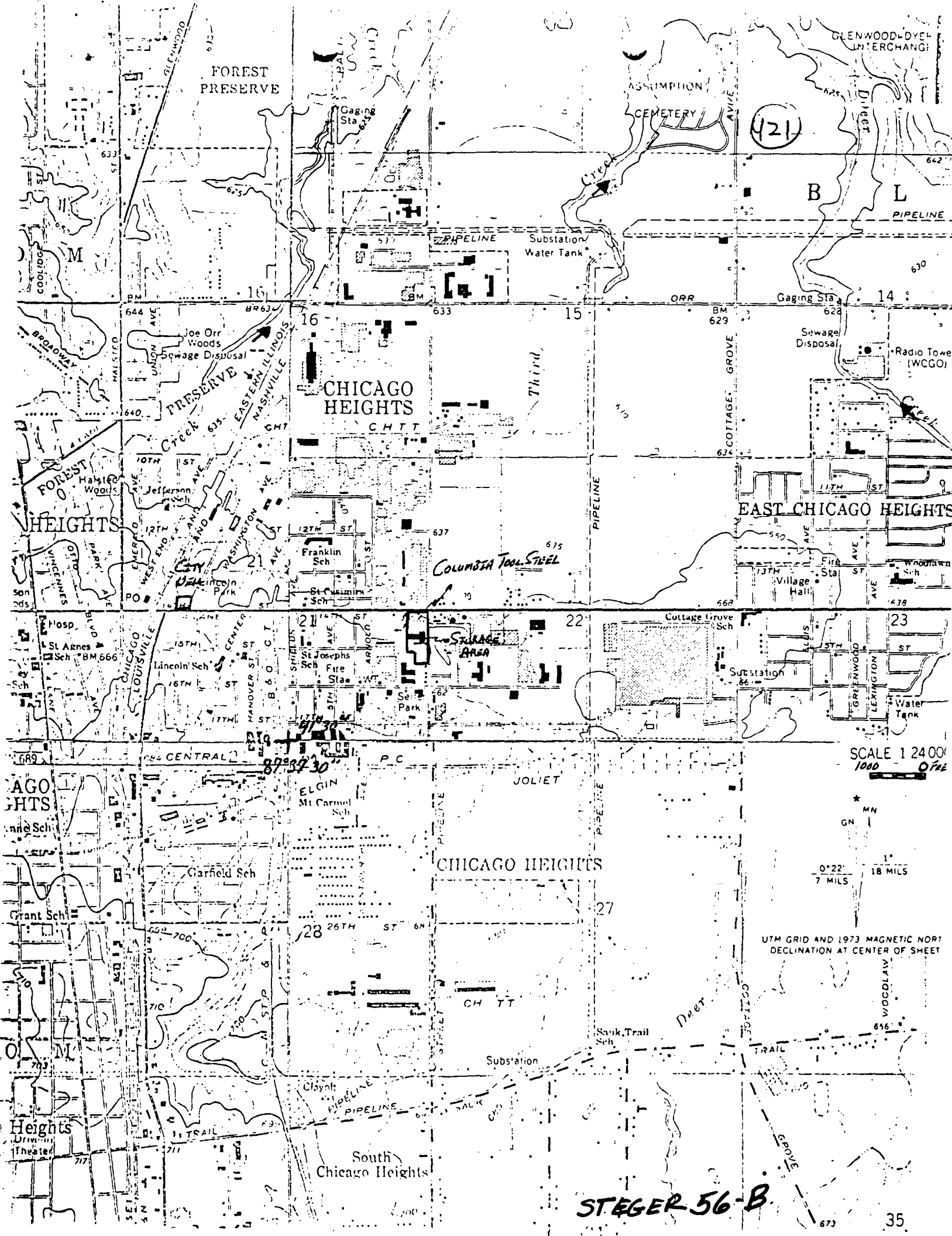
This company is engaged in the manufacture of high grade steel which they supply to outside tool manufacturers. Finished steel products from the facility are billets, round bars and forged steel forms. In the production of tool steel, this facility operates two electric arc furnaces with capacities of up to 5 tons and 9 tons capacity each, a one ton induction furnace, a number of steam-power drop hammers, and annealing and reheat furnaces.

One hazardous waste is generated - listed as K061 - emission control dust from the primary production of steel in electric furnaces, or baghouse dust. It has a high chromium content.

The facility has four-7 cubic yard sealed boxes which are used to store the waste. Three are in use at one time, with the fourth held on the side. The boxes are connected with flexible tube directly to the point of waste generation (the furnaces). Once full, they are sealed off. The boxes are emptied every 90 days into trucks; the boxes do not leave the facility. The transporter hauls the waste off site to an IEPA approved landfill. This site has withdrawn as a storage facility, and is a generator only. This site has had minor violations in the past which have been corrected.

This Agency recommends a none priority for this site.

LW:mkb:103



FOREST PRESERVE

ASSUMPTION CEMETERY

(421)

B L PIPELINE

CHICAGO HEIGHTS

EAST CHICAGO HEIGHTS

COLUMBIA TOOL STEEL

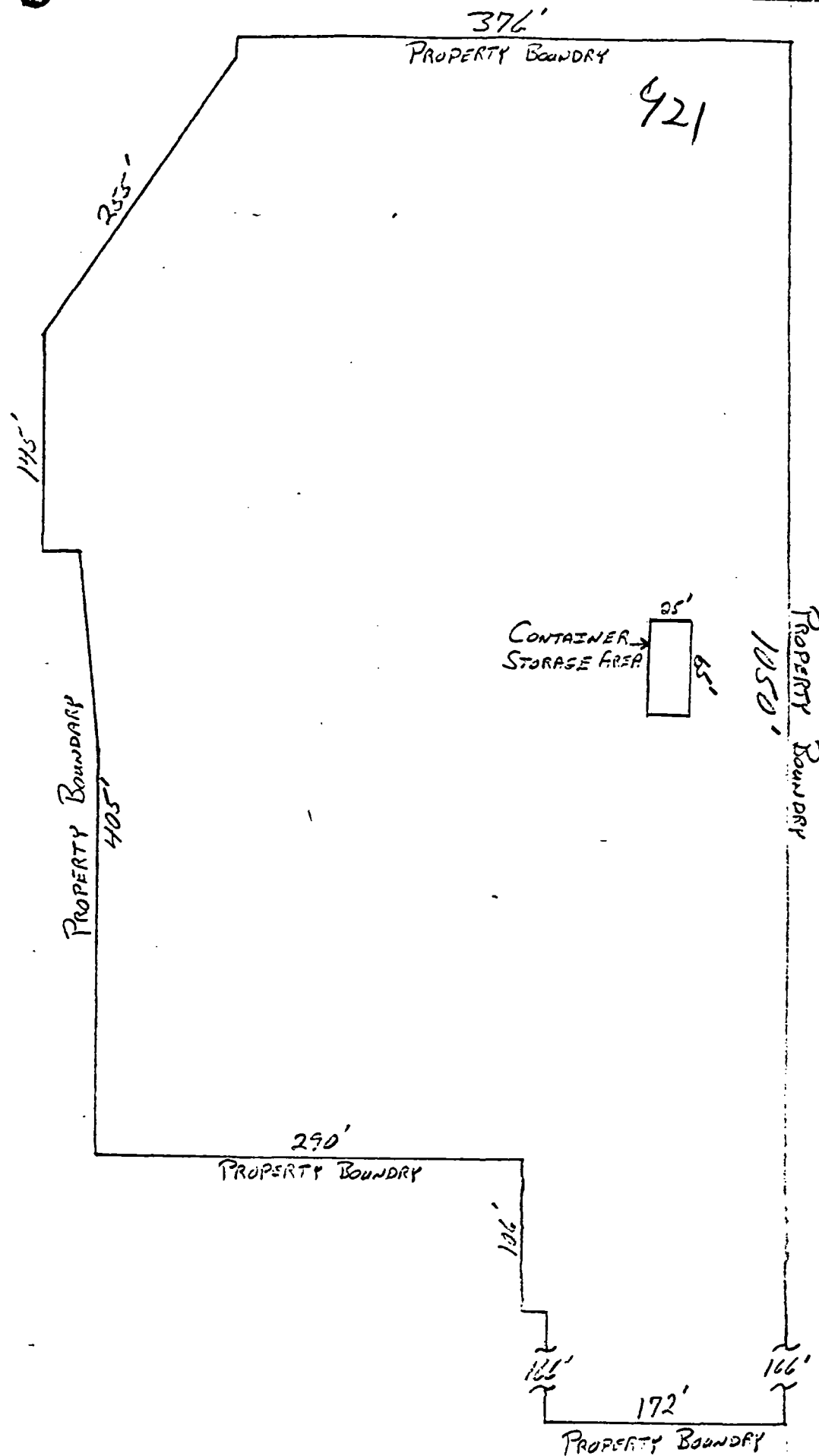
SCALE 1" = 2400'

0"22' 1" 18 MILS

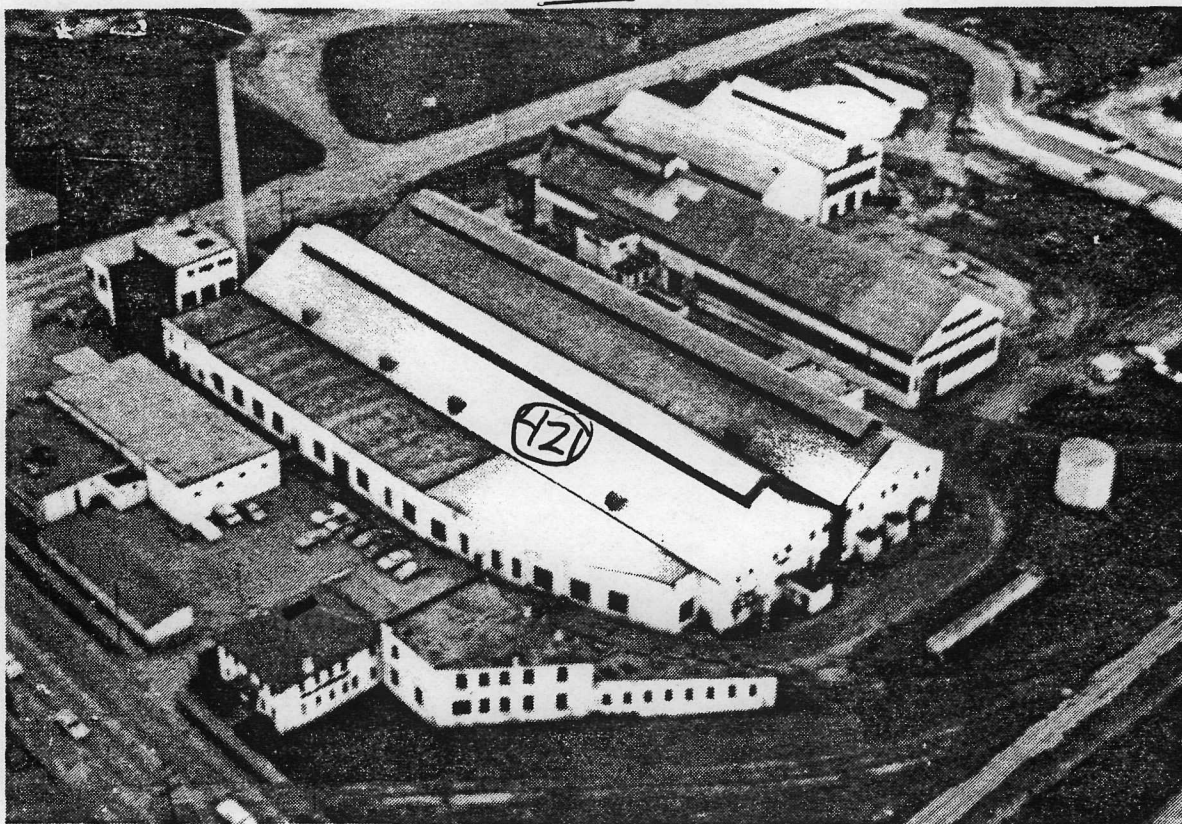
UTM GRID AND 1973 MAGNETIC NORTH DECLINATION AT CENTER OF SHEET

STEGER 56-B

V. FACILITY DRAWING (see page 4)



SCALE:  
1 INCH = 100 FT.



MAIN OFFICE AND WORKS – CHICAGO HEIGHTS, IL 60411